

R E S T R I C T E D

HEADQUARTERS
THEATER SERVICE FORCES
EUROPEAN THEATER
Office of the Theater Chief Surgeon
(Main), APO 757

ARMY
MEDICAL

JUL - 2 1946

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CIRCULAR LETTER NO. 87

18 December 1945

DENTAL REPORTS AND RETURNS.

1. Section I, Circular Letter No.24, Office of the Chief Surgeon, "Dental Reports and Returns", 20 March 1945, and paragraph 4, Section IV, Circular Letter No.58, Office of the Chief Surgeon, 20 July 1945, are rescinded.

2. Responsibility for dental reports, returns, and records. - The senior dental officer of a command or station will be responsible to the surgeon for the preparation, authentication, transmission, and safekeeping of the reports, returns, and records prescribed for the Dental Corps.

3. Reports. Reports required are -

a. Monthly Report of Dental Service (WD AGO Form 8-98 - old MD Form 57). A report of dental service is required monthly from every military station and separate command where a dental officer has been on duty during the month. It will be signed by the dental surgeon. The report will be rendered on WD AGO Form 8-98 and will be a compilation of the record of dental activities for the period, as follows :

(1) Section 1. Enter the post, camp, station, or command with its name, location, and strength. The strength (except air force stations) will include not only that of the unit itself but also those attached thereto for whom dental service is actually available. This strength will not include personnel of units furnished emergency treatment only. The strength of a general dispensary will be the approximate number of military personnel in the vicinity for whom dental service may be accomplished. For air force stations strength will include all tactical units on field or station which have no dental officers assigned or attached.

(2) Section 2. Enter the calendar month or the beginning and end of period if less than the calendar month.

(3) Section 3. General summary of dental service.

(a) Headings - "Military" - includes all personnel in the armed forces of the United States. "Others" - divide the column and mark one column "P.W." for prisoners of war. Mark the last column "Others" for all persons not included under "Military" or "P.W."

(b) Admissions - Record total of military personnel admitted for routine treatment as routine admissions, and those admitted for relief of pain or other intolerable (acute) conditions as emergency admissions, for the calendar month. Separate entries will be made for prisoners of war and others. Only one routine admission will be recorded for a patient requiring dental treatment even though the treatment continues for more than one calendar month. If there is a lapse or postponement of an appointment for an indefinite period, a new admission may be recorded.

(c) Sittings given - Each visit of a patient to the dental clinic for treatment is considered a sitting. Sittings for the purpose of examination will be recorded.

(4) Section 4. Classification of military personnel. Enter the classification of the command from last survey if a survey has been taken during the month, or modify the survey figures in subsequent months, estimating changes in classification by a review of the number of patients called for treatment from the survey lists. Under the regular total of all Class I cases list in parentheses the number of these that are 1-d (require dentures to masticate the Army ration).

(5) Section 5. Duty Personnel.

(a) Officer personnel - Enter the name, rank, component (RA-RES-NG-AUS) and duty such as Chief of Dental Service, Prosthodontist, etc. of officers permanently assigned during the month with inclusive dates of duty, leave, etc. (Example - Jones, Joseph J., Capt., AUS, 0324567, Prosthodontist, Dy 1-15; T/Dy 16-20; Lv 21-30). If necessary two lines may be used for this purpose. Enter separately the name, rank, component, duty, and organization of all officers attached and present for duty during the month with inclusive dates, etc.

(b) Other personnel - Report only the number of enlisted men of each grade on duty with the dental service on the last day of the month which includes those attached from other units. Civilian employees and prisoners of war will also be recorded by occupation.

(6) Summary.

(a) Separate listings will be made of the number of dental officers assigned, attached, or otherwise present for duty. The number of dental officers assigned or attached should be as of the last day of the month.

(b) Total days of duty is the combined total of the number of days officers were assigned, attached, or otherwise present for duty. It is figured by taking the number of dental officers who have been assigned or attached for the entire month, times the actual number of days in that month, plus the number of dental officers who have been assigned and attached less than a month, times the actual number of days such officers have been assigned or attached. This figure will be placed to the right of the heading "Total days of duty". The total

number of days not present for dental duty, such as sick, leave, assigned for other duty, etc., will be placed directly below the heading, "Total days of duty". This number is the total number of days the dental officers (assigned or attached to the dental service) were not available for dental duty, such as days of sick leave, days of sickness, days on any type of leave, days delegated to courts-martial duty, days to duty other than dentistry, or availability for dental duty. Sundays are not included in the number which is placed below "Total days of duty", if the officer in question is available for dental duty. This method permits higher headquarters to figure how many dental officers, assigned or attached, were actually available for dental duty after those officers who are on leave or other duties, etc., are discounted.

There is no intent to analyze the relative amount of work accomplished for a given station or command from these reports, since quality rather than quantity is the real and only measurement of dental service. However it is fair and just to expect an honest day's work from every dental officer who is on duty.

It is important to know what percentage of the total dental manpower is actually giving dental treatment. No doubt there are months when an organization is in training that the dental personnel effective rate may be 25 percent or less. There is no way of making a dental manpower measurement unless these figures in this section of the report are accurate.

(7) Section 6. Casos Diagnosod.

(a) The standard terms for diagnoses will be used so far as practicable in accordance with paragraph 5, AR 40-1010. The diagnostic terms used should be spelled out in full and abbreviations not used on the monthly report. The data for this section are obtained from the individual Register of Dental Patients: WD AGO Form 8-116 (old MD Form 79 which will be used until existing stocks are depleted). Abbreviations are authorized for use on the Register of Dental Patients.

(b) No exact balance between sections 6 and 7 is desirable; however, the operations should be prepared from the diagnosed cases in accordance with good professional practice. Caries and Defective filling are diagnoses to be used only when permanent fillings are inserted. For tooth treatment or extraction, use appropriate diagnoses such as Pulpitis or Abscess, Periapical.

(c) The diagnosis maxilla edentulous or mandible edentulous will be made only when a full upper or lower has been completed and inserted. Full dentures under section 7 should be balanced by the total of maxilla and mandible edentulous under section 6. Teeth so replaced will not be recorded as "Tooth Missing".

(d) The diagnosis "Tooth Missing" is not recorded until an appliance is inserted. The entry placed opposite the diagnosis "Tooth Missing" in section 6 will represent the number of artificial teeth actually inserted and not the number of natural teeth missing.

(e) Dentures made in civilian practice or at another station which require adjustment should be recorded as "Denture, defective". "Denture, defective" is also the correct diagnosis for "Denture, repaired" or "Denture, rebased".

(f) Diagnosis calling for treatment such as gingivitis, cellulitis, etc., will be entered one time only for each case. Enter as many treatments under section 7 as are given.

(g) The diagnosis "Eye Missing" will be used with treatment "Acrylic Eye inserted".

(8) Section 7. Operations Performed.

(a) When a station takes an impression, completes the laboratory work, and then sends the denture to another station or command for insertion, the station or command actually inserting the denture will take credit under sections 6 and 7.

(b) The station taking the impressions and completing the laboratory work will cite such accomplishments only under section 8, General Remarks. However, credit for a sitting may also be taken on report of dental service under Section 3, General Summary.

(c) Laboratories, other than central dental laboratories fabricating dentures for stations other than their own will list such laboratory work under Section 8, General Remarks.

(d) Credit for denture adjustments will not be taken on cases which were completed at home station unless the dentures have been in use several months. Credit for adjustments may be taken on cases which were made in civilian practice or at another station. Credit may be taken for sittings for all denture adjustments, and the diagnosis on WD AGO Form 8-116 (old MD Form 79) should be shown as "reappointment" for cases completed at home station.

(e) Credit for "Calculus, removal of" should only be taken when the removal of calculus has been completed. If two, three or more sittings are required to complete the case, credit will be taken under section 3 (Sittings given) only.

(f) "Fracture, reduction of" will be used only at the first unit where the fracture was treated and reduced. The diagnosis will be "Fracture, (bone specified) new". All other installations will use the diagnosis of "Fracture, (bone specified) old", and treatment will be recorded as "Post Operative Treatment".

(g) Treatments of teeth using oxyphosphate cements will be recorded under "Tooth, treatment of". They will not be reported as restorations nor will caries be used as the diagnosis.

(9) When dental service for prisoners of war is reported, the column "Others" in sections 6 and 7 will be divided and all such work listed separately.

(10) Section 8 - General Remarks.

(a) Reference (brief) should be made to inadequacies of personnel or equipment or to any other condition which interferes with the maximum of professional service performed for the period.

(b) The total number of dental chairs, cabinets, dental operating units, X-rays, MD chests Nos. 60, 61 and 62, and dental kits available at any post, camp, station, or command will be listed.

(c) The approximate number of patients treated from other commands will be noted.

(11) Time of Submission.

(a) This report, including a copy for each of the succeeding higher echelons will be forwarded through medical channels by all stations and commands before the fifth day of the next succeeding month. It will bear the Registry Number WD-69 written in the upper right hand corner.

(12) Classification - RESTRICTED.

b. Consolidated Report of Dental Service.

(1) Will be submitted by dental surgeons of divisions, higher headquarters of Field Forces, Air Forces, Separate Commands, and Districts.

(2) Frequency - Monthly.

(3) Will contain WD AGO Form 8-98 (old MD Form 57) completely filled in, consolidated from reports of units, dispensaries, and attached units in accordance with instructions given in paragraph 3a above with the following exception:

(a) Listing of officers not required as they will be shown in the individual reports forwarded with the consolidated report.

(4) Minor errors in individual unit reports will be corrected by the consolidating officer with a note to the officer in error to eliminate repetition of the mistake. Reports with gross errors will be returned for correction and resubmission.

(5) Classification - RESTRICTED.

(6) Time of Submission.

(a) Monthly consolidations prepared by dental surgeons of intermediate commands will be submitted as directed by higher command. Final consolidations by dental surgeons of Field Forces, Air Forces, separate Commands, Base Sections and Districts, will be submitted to the Office of the Chief Surgeon, Theater Service Forces, European Theater (Main), APO 757, on or before the twelfth of each month.

(7) Copies and Channels.

(a) Intermediate headquarters will submit copies through medical channels as directed by higher headquarters.

(b) Dental Surgeons of Major Commands, Separate Commands, Base Sections and Districts will submit one copy of the consolidated report accompanied by the original report of each unit. It will bear the Registry Number WD-69 written in the upper right hand corner.

By order of the Theater Chief Surgeon:

Daniel J. Waligora

DANIEL J. WALIGORA,
Colonel, Medical Corps.
Executive Officer.

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IV. COMBINED RECORDING OF DENTAL REPORTS.

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